

WATER WELL REPORT

STATE OF WASHINGTON

Notice of Intent W0120058

UNIQUE WELL ID # ABD 020

Water Right Permit No. 31-2E-14F

(1) OWNER: Name Ryan Buffington Address 18003 25th Ave NE Arlington

(2) LOCATION OF WELL: County Island NW 1/4 SE 1/4 Sec 14 T 31 N R 2E WM

(2a) STREET ADDRESS OF WELL: (or nearest address) Kodiak Dr. Camano IS WA

TAX PARCEL NO.:

(3) PROPOSED USE: ☒ Domestic ☐ Industrial ☐ Municipal
☐ Irrigation ☐ Test Well ☐ Other
☐ DeWater

(4) TYPE OF WORK: Owner's number of well (if more than one) _____
☒ New Well ☐ Modified ☐ Bored
☐ Deepened ☐ Cased ☐ Driven
☐ Reconditioned ☐ Cable ☐ Jetted
☐ Decommission ☒ Rotary

(5) DIMENSIONS: Diameter of well 6 inches
Drilled 264 feet Depth of completed well 258 ft.

CONSTRUCTION DETAILS

Casing installed: ☒ Welded 6 ft. Diam from 0 ft. to 253 ft.
☐ Liner installed _____ ft. Diam from _____ ft. to _____ ft.
☐ Threaded _____ ft. Diam from _____ ft. to _____ ft.

Perforations: ☐ Yes ☒ No
Type of perforator used _____
SIZE of perforations _____ in by _____ in.
_____ perforations from _____ ft. to _____ ft.

Screens: ☒ Yes ☐ No ☒ K-Pac Location 252
Manufacturer's Name Wesco
Type SS Model No. _____
Diam. 5" Slot Size 8 from 253 ft. to 258 ft.
Diam. _____ Slot Size _____ from _____ ft. to _____ ft.

Gravel/Filter packed: ☐ Yes ☒ No ☐ Size of gravel/sand _____
Material placed from _____ ft. to _____ ft.

Surface seal: ☒ Yes ☐ No To what depth? 18 ft.
Material used in seal Bentonite
Did any strata contain unusable water? ☐ Yes ☒ No
Type of water? _____ Depth of strata _____
Method of sealing strata off _____

(7) PUMP: Manufacturer's Name unknown
Type: _____ H.P. _____

(8) WATER LEVELS: Land-surface elevation above mean sea level _____ ft.
Static level 193 ft. below top of well Date 10-21-99
Artesian pressure _____ lbs. per square inch Date _____
Artesian water is controlled by _____ (Cap, valve, etc.)

(9) WELL TESTS. Drawdown is amount water level is lowered below static level
Was a pump test made? ☐ Yes ☐ No If yes, by whom? _____
Yield: _____ gal./min. with _____ ft. drawdown after _____ hrs.
Yield: _____ gal./min. with _____ ft. drawdown after _____ hrs.
Yield: _____ gal./min. with _____ ft. drawdown after _____ hrs.
Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level)
Time Water Level Time Water Level Time Water Level

Date of test _____
Bailer test _____ gal./min. with _____ ft. drawdown after _____ hrs.
Airtest 50 gal./min. with _____ ft. drawdown after _____ hrs.
Artesian flow _____ g.p.m. Date _____
Temperature of water _____ Was a chemical analysis made? ☐ Yes ☒ No

(10) WELL LOG or DECOMMISSIONING PROCEDURE DESCRIPTION
Formation: Describe by color, character, size of material and structure, and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of information. Indicate all water encountered.

MATERIAL	FROM	TO
Sand, gravel & Boulders	0	6
Hardpan & Boulders	6	102
Sandy clay	102	186
Gray clay	176	246
Gray silty sand	246	251
Gray sand & water	251	264

I certify that this well meets state and county codes

Don SC 1692
RECEIVED

NOV 10 1999

DEPT OF ECOLOGY

Work Started 10-18-99 Completed 10-21-99

WELL CONSTRUCTION CERTIFICATION:

I constructed and/or accept responsibility for construction of this well, and its compliance with all Washington well construction standards. Materials used and the information reported above are true to my best knowledge and belief.

Type or Print Name Don Stein License No. 1692
(Licensed Driller/Engineer)

Trainee Name _____ License No. _____

Drilling Company Stein well Drilling

(Signed) Don Stein License No. 1692
(Licensed Driller/Engineer)

Address 620 N. W. Borg et. Camano

Contractor's Registration No. Stein & Dessler Date 10-21-99

(USE ADDITIONAL SHEETS IF NECESSARY)

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